

## CALIFORNIA CODES ANNOTATED

\*\*\* THIS DOCUMENT IS CURRENT THROUGH THE 2004 SUPPLEMENT \*\*\*  
\*\*\* 2003-04 REGULAR, 1ST EXTRA, AND 2ND EXTRA, SESSIONS \*\*\*

WELFARE AND INSTITUTIONS CODE  
DIVISION 5. Community Mental Health Services  
PART 4. The Children's Mental Health Services Act  
CHAPTER 1. Interagency System of Care  
**ARTICLE 1. Legislative Findings and Intent**

**§ 5850. Citation of part**

This part shall be known and may be cited as the Children's Mental Health Services Act.

**HISTORY:** Added Stats 1992 ch 1229 § 2 (AB 3015).

**NOTES:****FORMER SECTIONS:**

Former § 5850, similar to the present section, was added Stats 1991 ch 89 § 197, effective June 30, 1991, and repealed Stats 1992 ch 1229 § 1.

**NOTE-**

Stats 1998 ch 311 provides:

SEC. 72. (a) The State Department of Social Services shall convene a working group of representatives of County Welfare Directors, the Chief Probation Officers, foster and former foster youth, group home providers, and other interested parties convene a working group to develop protocols outlining the roles and responsibilities of placing agencies and group homes regarding emergency and nonemergency placements of foster children in group homes.

(b) The department shall submit a report obtained from the working group containing sample protocols to the appropriate policy and fiscal committees of the Legislature by May 1, 1999.

(c) The model protocols shall at a minimum address all of the following:

(1) Relevant information regarding the child and family that placement workers shall provide to group homes, including health, mental health, and education information pursuant to Section 16010 of the Welfare and Institutions Code.

(2) Appropriate orientations to be provided by group homes for foster children and, if appropriate, their families, after a decision to place has been made.

(3) County and provider responsibilities in ensuring the child receives timely access to treatment and services to the extent they are available identified in the child's case plan and treatment plan, including multidisciplinary assessments provided in counties involved in the Systems of Care Program under Part 4 (commencing with Section 5850) of Division 5 of the Welfare and Institutions Code.

(4) County and provider responsibilities in the periodic monitoring of foster children to ensure the continued appropriateness of the placements and the continued progress toward achieving the case plan and treatment plan goals.

(5) Appropriate mechanisms, timelines, and information sharing regarding discharge planning.

**§ 5851. Legislative findings and declarations; Intent**

(a) The Legislature finds and declares that there is no comprehensive county interagency system throughout California for the delivery of mental health services to seriously emotionally and behaviorally disturbed children and their families. Specific problems to be addressed include the following:

(1) The population of children which should receive highest priority for services has not been defined.

(2) Clear and objective client outcome goals for children receiving services have not been specified.

(3) Although seriously emotionally and behaviorally disturbed children usually have multiple disabilities, the many different state and county agencies, particularly education, social services, juvenile justice, health, and mental health agencies, with shared responsibility for these individuals, do not always collaborate to develop and deliver integrated and cost-effective programs.

(4) A range of community-based treatment, case management, and interagency system components required by children with serious emotional disturbances has not been identified and implemented.

(5) Service delivery standards that ensure culturally competent care in the most appropriate, least restrictive environment have not been specified and required.

(6) The mental health system lacks accountability and methods to measure progress towards client outcome goals and cost-effectiveness. There are also no requirements for other state and county agencies to collect or share relevant data necessary for the mental health system to conduct this evaluation.

(b) The Legislature further finds and declares that the model developed in Ventura County beginning in the 1984-85 fiscal year through the implementation of Chapter 1474 of the Statutes of 1984 and expanded to the Counties of Santa Cruz, San Mateo, and Riverside in the 1989-90 fiscal year pursuant to Chapter 1361 of the Statutes of 1987, provides a comprehensive, interagency system of care for seriously emotionally and behaviorally disturbed children and their families and has successfully met the performance outcomes required by the Legislature. The Legislature finds that this accountability for outcome is a defining characteristic of a system of care as developed under this part. It finds that the system established in these four counties can be expanded statewide to provide greater benefit to children with serious emotional and behavioral disturbances at a lower cost to the taxpayers. It finds further that substantial savings to the state and these four counties accrue annually, as documented by the independent evaluator provided under this part. Of the amount continuing to be saved by the state in its share of out-of-home placement costs and special education costs for those counties and others currently funded by this part, a portion is hereby reinvested to expand and maintain statewide the system of care for children with serious emotional and behavioral disturbances.

(c) Therefore, using the Ventura County model guidelines, it is the intent of the Legislature to accomplish the following:

(1) To phase in the system of care for children with serious emotional and behavioral problems developed under this part to all counties within the state.

(2) To require that 100 percent of the new funds appropriated under this part be dedicated to the targeted population as defined in Sections 5856 and 5856.2. To this end, it is the intent of the Legislature that families of eligible children be involved in county program planning and design and, in all cases, be involved in the development of individual child treatment plans.

(3) To expand interagency collaboration and shared responsibility for seriously emotionally and behaviorally disturbed children in order to do the following:

(A) Enable children to remain at home with their families whenever possible.

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(B) Enable children placed in foster care for their protection to remain with a foster family in their community as long as separation from their natural family is determined necessary by the juvenile court.

(C) Enable special education pupils to attend public school and make academic progress.

(D) Enable juvenile offenders to decrease delinquent behavior.

(E) Enable children requiring out-of-home placement in licensed residential group homes or psychiatric hospitals to receive that care in as close proximity as possible to the child's usual residence.

(F) Separately identify and categorize funding for these services.

(4) To increase accountability by expanding the number of counties with a performance contract that requires measures of client outcome and cost avoidance.

(d) It is the intent of the Legislature that the outcomes prescribed by this section shall be achieved regardless of the cultural or ethnic origin of the seriously emotionally and behaviorally disturbed children and their families.

**HISTORY:** Added Stats 1992 ch 1229 § 2 (AB 3015). Amended Stats 1996 ch 1167 § 1 (SB 1667), effective September 30, 1996; Stats 2000 ch 520 § 1 (SB 1452).

**NOTES:**

**FORMER SECTIONS:**

Former § 5851, similar to the present section, was added Stats 1991 ch 89 § 197, effective June 30, 1991, amended Stats 1991 ch 611 § 71, effective October 6, 1991, and repealed Stats 1992 ch 1229 § 1.

**AMENDMENTS:**

1996 Amendment:

Added the last sentence of subd (b).

2000 Amendment:

Substituted "standards that" for "standards, which" in subd (a)(5).

**NOTE-**

Stats 2000 ch 520 provides:

SEC. 15. This act shall be known, and may be cited, as the Cathie Wright Children's Mental Health Services Act.

**§ 5851.5. "System of care county"**

For the purposes of this part, a "system of care county" means a county which has been approved by the State Department of Mental Health as having the capability to provide child- and family-centered services in a collaborative manner, resulting in quantitative outcome measures.

**HISTORY:** Added Stats 1992 ch 1229 § 2 (AB 3015).

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**ARTICLE 2. County Systems of Care and Their Mission**

**§ 5852. Interagency system of care; Adoption of model**

There is hereby established an interagency system of care for children with serious emotional and behavioral disturbances that provides comprehensive, coordinated care based on the demonstration project under former Chapter 7 (commencing with Section 5575), as added by Chapter 160 of the Statutes of 1987, and the 1983 State Department of Mental Health planning model for children's services. Each participating county shall adapt the model to local needs and priorities.

**HISTORY:** Added Stats 1992 ch 1229 § 2 (AB 3015).

**NOTES:**

**FORMER SECTIONS:**

Former § 5852, similar to the present section, was added Stats 1991 ch 89 § 197, effective June 30, 1991, and repealed Stats 1992 ch 1229 § 1.

**§ 5852.5. Review of costs or goal achievement**

The department shall review those counties that have been awarded funds to implement a comprehensive system for the delivery of mental health services to children with serious emotional disturbance and to their families or foster families to determine compliance with either of the following:

(a) The total estimated cost avoidance in all of the following categories shall equal or exceed the applications for funding award moneys:

- (1) Group home costs paid by Aid to Families with Dependent Children-Foster Care (AFDC-FC) program.
- (2) Children and adolescent state hospital and acute inpatient programs.
- (3) Nonpublic school residential placement costs.
- (4) Juvenile justice reincarcerations.
- (5) Other short- and long-term savings in public funds resulting from the applications for funding award moneys.

(b) If the department determines that the total cost avoidance listed in subdivision (a) does not equal or exceed applications for funding award amounts, the department shall determine that the county that has been awarded funding shall achieve substantial compliance with all of the following goals:

- (1) Total cost avoidance in the categories listed in subdivision (a) to exceed 50 percent of the applications for funding award moneys.
- (2) A 20-percent reduction in out-of-county ordered placements of juvenile justice wards and social service dependents.
- (3) A statistically significant reduction in the rate of recidivism by juvenile offenders.

(4) A 25-percent reduction in the rate of state hospitalization of minors from placements of special education pupils.

(5) A 10-percent reduction in out-of-county nonpublic school residential placements of special education pupils.

(6) Allow at least 50 percent of children at risk of imminent placement served by the intensive in-home crisis treatment programs, which are wholly or partially funded by applications for funding award moneys, to remain at home at least six months.

(7) Statistically significant improvement in school attendance and academic performance of seriously emotionally disturbed special education pupils treated in day treatment programs which are wholly or partially funded by applications for funding award moneys.

(8) Statistically significant increases in services provided in nonclinic settings among agencies.

(9) Increase in ethnic minority and gender access to services proportionate to the percentage of these groups in the county's school-age population.

**HISTORY:** Added Stats 1992 ch 1374 § 49 (AB 14), effective October 27, 1992. Amended Stats 2000 ch 520 § 2 (SB 1452).

**NOTES:**

**AMENDMENTS:**

2000 Amendment:

(1) Amended the introductory clause of subd (a) by (a) deleting ", through the request for proposal bids," after "have been awarded"; and (b) substituting "to determine compliance with" for "for"; (2) substituted "applications for funding" for "request for proposal" wherever it appears; (3) substituted "and acute inpatient" for "programs" in subd (a)(2); (4) substituted "funds" for "finds" after "in public" in subd (a)(5); (5) substituted "funding" for "request for proposal moneys" after "has been awarded" in the introductory clause of subd (b); (6) deleted "in" after "in out-of-county" in subd (b)(5); and (7) added subds (b)(8) and (b)(9).

**NOTE-**

Stats 2000 ch 520 provides:

SEC. 15. This act shall be known, and may be cited, as the Cathie Wright Children's Mental Health Services Act.

**§ 5853. Nature of county participation**

County participation under this part shall be voluntary.

**HISTORY:** Added Stats 1992 ch 1229 § 2 (AB 3015).

**NOTES:**

**FORMER SECTIONS:**

Former § 5853, similar to the present section, was added Stats 1991 ch 89 § 197, effective June 30, 1991, and repealed Stats 1992 ch 1229 § 1.

**§ 5854. Contracts with counties; Request to participate**

The State Department of Mental Health may contract with counties whose programs have been approved by the department and selected pursuant to Article 4 (commencing with Section 5857). A county may request to participate under this part each year according to the terms set forth in Section 5705 for the purpose of establishing a three-year program proposal for developing and implementing a children's comprehensive mental health services system. The contract shall be negotiated on a yearly basis, based on the scope of work plan for each implementation phase.

**HISTORY:** Added Stats 1992 ch 1229 § 2 (AB 3015).

**NOTES:****FORMER SECTIONS:**

Former § 5854, similar to the present section, was added Stats 1991 ch 89 § 197, effective June 30, 1991, and repealed Stats 1992 ch 1229 § 1.

**§ 5855. Mission; Essential values**

The department shall adopt as part of its overall mission the development of community-based, comprehensive, interagency systems of care that target seriously emotionally and behaviorally disturbed children separated from their families or at risk of separation from their families, as defined in Section 5856. These comprehensive, interagency systems of care shall seek to provide the highest benefit to children, their families, and the community at the lowest cost to the public sector. Essential values shall be as follows:

- (a) Family preservation. Children shall be maintained in their homes with their families whenever possible.
- (b) Least restrictive setting. Children shall be placed in the least restrictive and least costly setting appropriate to their needs when out-of-home placement is necessary.
- (c) Natural setting. Children benefit most from mental health services in their natural environments, where they live and learn, such as home, school, foster home, or a juvenile detention center.
- (d) Interagency collaboration and a coordinated service delivery system. The primary child-serving agencies, such as social services, probation, education, health, and mental health agencies, shall collaborate at the policy, management, and service levels to provide a coordinated, goal-directed system of care for seriously emotionally disturbed children and their families.
- (e) Family involvement. Family participation is an integral part of assessment, intervention, and evaluation.
- (f) Cultural competence. Service effectiveness is dependent upon both culturally relevant and competent service delivery.

**HISTORY:** Added Stats 1992 ch 1229 § 2 (AB 3015).

**NOTES:****FORMER SECTIONS:**

Former § 5855, relating to approval of county program, was added Stats 1991 ch 89 § 197, effective June 30, 1991, and repealed Stats 1992 ch 1229 § 1.

**§ 5855.5. Projects funded under prior provisions**

(a) Projects funded pursuant to Part 4 (commencing with Section 5850) of Division 5, as added by Chapter 89 of the Statutes of 1991, shall continue under the terms of this part.

(b) The department shall negotiate with each participating county to establish appropriate evaluation measures for the county's children's system of care program after the initial three-year implementation funding period as established in Section 5854. The department shall, on an annual basis, negotiate a performance contract with each county electing to continue its children's system of care program. The annual performance contract shall be consistent county to county, and shall include, but not be limited to, a scope of work plan consistent with the provisions of this part and shall contain a budget that has sufficient detail to meet the requirements of the department.

**HISTORY:** Added Stats 1992 ch 1229 § 2 (AB 3015), as W & I C § 5856. Renumbered by Stats 1993 ch 589 § 195 (AB 2211). Amended Stats 2000 ch 520 § 3 (SB 1452).

**NOTES:****AMENDMENTS:**

2000 Amendment:

(1) Added subdivision designation (a); (2) deleted the former second sentence of subd (a) which read: "The State Department of Mental Health shall, no later than June 30, 1993, amend existing contracts for these projects to reflect the requirements of this part."; and (3) added subd (b).

**NOTE-**

Stats 2000 ch 520 provides:

SEC. 15. This act shall be known, and may be cited, as the Cathie Wright Children's Mental Health Services Act.

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**ARTICLE 3. Target Client Population**

**§ 5856. "Seriously emotionally disturbed children"**

For the purposes of this part, "seriously emotionally disturbed children" means those minors under 18 years of age described in paragraph (2) of subdivision (a) of Section 5600.3.

**HISTORY:** Added Stats 1992 ch 1229 § 2 (AB 3015).

**NOTES:****FORMER SECTIONS:**

Former § 5856, relating to joint proposals and elements, was added Stats 1991 ch 89 § 197, effective June 30, 1991, and repealed Stats 1992 ch 1229 § 1.

**EDITOR'S NOTES:**

There was another section of this number which was added Stats 1992 ch 1229 § 2 and renumbered W & I C § 5855.5 by Stats 1993 ch 589 § 195.

**§ 5856.2. Eligible children; Design of programs**

(a) Eligible children shall include seriously disturbed children who meet the requirements of Section 5856 and who are referred by collaborating programs, including wrap-around programs (Chapter 4 (commencing with Section 18250) of Part 6 of Division 9), Family Preservation programs (Part 4.4 (commencing with Section 16600) of Division 9), Juvenile Crime Enforcement and Accountability Challenge Grant programs (Article 18.7 (commencing with Section 749.2) of Chapter 2 of Part 1 of Division 1), programs serving children with dual diagnosis including substance abuse or whose emotional disturbance is related to family substance abuse, and children whose families are enrolled in CalWORKs (Chapter 2 (commencing with Section 11200.5) of Part 3 of Division 9).

(b) Counties shall ensure, within available resources, that programs are designed to serve young children from zero to five years of age, inclusive, their families, and adolescents in transition from 15 to 21 years of age, inclusive.

**HISTORY:** Added Stats 2000 ch 520 § 4 (SB 1452).

**NOTES:****NOTE-**

Stats 2000 ch 520 provides:

SEC. 15. This act shall be known, and may be cited, as the Cathie Wright Children's Mental Health Services Act.

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**ARTICLE 4. County Selection**

**§ 5857. Applications for funding; Letters of intent**

(a) The State Department of Mental Health shall issue a request for applications for funding for new children's system of care programs to nonparticipating counties in each year that additional funds are provided for statewide expansion pursuant to this part.

(b) Applications shall be submitted to the department by a county mental health department with joint approval of collaborating local agencies including, but not limited to, special education, juvenile court, probation, child protective services agencies, the board of supervisors, and the mental health advisory board.

(c) Program staff from the department shall review all applications for funding for compliance with all requirements of law and the application guidelines established by the department.

(d) The department may accept letters of intent from a county in lieu of an application if moneys are not available to the county, to affirm commitment by the county to participate in the request for applications for funding process when moneys become available. Upon approval of an application by the director, a county shall be funded for an initial three-year contract period as described in Section 5854 and annually thereafter, consistent with the provisions of this part. If a county is complying with the provisions of this part, the department shall assure that the county receives an annual allocation consistent with departmental guidelines for full funding, as resources are made available.

**HISTORY:** Added Stats 1992 ch 1229 § 2 (AB 3015). Amended Stats 1993 ch 589 § 196 (AB 2211); Stats 1996 ch 1167 § 2 (SB 1667), effective September 30, 1996; Stats 2000 ch 520 § 5 (SB 1452).

**NOTES:****FORMER SECTIONS:**



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Former § 5857, similar to present W & I C § 5870, was added Stats 1991 ch 89 § 197, effective June 30, 1991, and repealed Stats 1992 ch 1229 § 1.

## AMENDMENTS:

## 1993 Amendment:

(1) Deleted former subd (d) which read: "(d) Proposals shall be selected by the independent selection committee established pursuant to Section 5858."; and (2) redesignated former subd (e) to be subd (d).

## 1996 Amendment:

(1) Substituted "in each year that additional funds are provided for expansion pursuant to this part" for "no later than February 1 of each year" in subd (a); and (2) deleted "no later than July 1 of that year" after "mental health department" in subd (b).

## 2000 Amendment:

(1) Amended subd (a) by (a) substituting "applications for funding for new children's system of care programs to nonparticipating" for "proposals to"; and (b) adding "statewide"; (2) amended subd (b) by substituting (a) "Applications" for "Proposals"; and (b) "probation, child protective service agencies, the board of supervisors," for "and child protective services agencies, as well as, the board of supervisors"; (3) amended subd (c) by substituting (a) "all applications for funding" for "and approve all proposals"; and (b) "the application guidelines established by the department" for "request for proposals guidelines"; (4) amended subd (d) by (a) substituting "an application" for "a proposal"; (b) substituting "applications for funding" for "proposals" in the first sentence; and (c) adding the second and third sentences.

## NOTE-

Stats 2000 ch 520 provides:

SEC. 15. This act shall be known, and may be cited, as the Cathie Wright Children's Mental Health Services Act.

§ 5858. [Section repealed 1992.]

**HISTORY:** Added Stats 1991 ch 89 § 197 (AB 1288), effective June 30, 1991. Repealed Stats 1992 ch 1229 § 1 (AB 3015). The repealed section related to task force to modify model for small counties.

**§ 5859. Deficient proposals**

If applications are deficient and not ready for approval, department program staff shall provide specific written descriptions of areas of deficiency to counties and provide, to the extent feasible, any requested training, consultation, and technical assistance to assist the applicant county to achieve necessary compliance and department approval.

**HISTORY:** Added Stats 1992 ch 1229 § 2 (AB 3015). Amended Stats 2000 ch 520 § 6 (SB 1452).

**NOTES:**

## FORMER SECTIONS:

Former § 5859, similar to present W & I C § 5862, was added Stats 1991 ch 89 § 197, effective June 30, 1991, and repealed Stats 1992 ch 1229 § 1.

## AMENDMENTS:

## 2000 Amendment:

Substituted "applications" for "proposals" at the beginning.

## NOTE-

Stats 2000 ch 520 provides:

SEC. 15. This act shall be known, and may be cited, as the Cathie Wright Children's Mental Health Services Act.

**§ 5860. Final selection; Use of funds; Contracts**

(a) Final selection of county proposals shall be subject to the amount of funding approved for expansion of services under this part.

(b) Counties shall use funds distributed under this part only in support of a mental health system serving seriously emotionally disturbed children in accordance with the principles and program requirements associated with the system of care model described in this part. The State Department of Mental Health shall audit and monitor the use of these funds to ensure that the funds are used solely in support of the children's system of care program and in accordance with the performance contract described in subdivision (c). If county programs receiving children's system of care funding do not comply with program and audit requirements determined by the department, funds shall be redistributed to other counties to implement, expand, or model children's system of care programs.

(c) The department shall enter into annual performance contracts with the selected counties and enter into training and consultation contracts as necessary to fulfill its obligations under this part. These annual performance contracts shall be in addition to the county mental health services performance contracts submitted to the department under Section 5650. Any changes in the staffing patterns or protocols, or both, approved in the original program proposal shall be identified and justified in these annual performance contracts. Annual performance contracts filed by counties operating the program as of January 1, 2001, shall, if approved by the department, serve as the baseline contract for purposes of this subdivision. The contracts shall be exempt from the requirements of the Public Contract Code and the State Administrative Manual and shall be exempt from approval by the Department of General Services.

**HISTORY:** Added Stats 1992 ch 1229 § 2 (AB 3015). Amended Stats 1996 ch 1167 § 3 (SB 1667), effective September 30, 1996; Stats 2000 ch 520 § 7 (SB 1452).

**NOTES:****FORMER SECTIONS:**

Former § 5860, similar to present W & I C § 5863, was added Stats 1991 ch 89 § 197, effective June 30, 1991, and repealed Stats 1992 ch 1229 § 1.

**AMENDMENTS:****1996 Amendment:**

(1) Redesignated former subd (a) to be subd (a)(1); (2) substituted "subject to" for "made after July 1 of each year, based on" in subd (a)(1); (3) added subds (a)(2) and (a)(3); and (4) amended subd (b) by (a) adding "and enter into training and consultation contracts as necessary to fulfill its obligations under this part" at the end of the first sentence; and (b) deleting "Pursuant to Section 5707.1," in the beginning of the last sentence.

**2000 Amendment:**

(1) Substituted subd (a) for former subd (a) which read: "(a) (1) Final selection of county proposals shall be subject to the amount of funding approved for expansion of services under this part.

"(2) Of the funds appropriated in Item 4440-101-0001 of the Budget Act of 1996, the sum of seven million one hundred twenty-five thousand dollars (\$ 7,125,000) shall be allocated, in accordance with the following schedule:

"(A) Eight hundred fifty-seven thousand dollars (\$ 857,000) shall be reappropriated in augmentation of Item 4440-001-001 to provide for departmental support for additional administrative costs associated with the augmentation contained in subparagraph (B).

"(B) Six million two hundred sixty-eight thousand dollars (\$ 6,268,000) in augmentation of Item 4440-101-001 to provide for the first year of a three-year phase in of statewide system of care services.

"(3) In order to provide for the second year of expansion of services under this part, the sum of nineteen million eight hundred twenty-three thousand dollars (\$ 19,823,000) is hereby appropriated from the General Fund to the department in augmentation of the Budget Act of 1997 in accordance with the following schedule:

"(A) One million nineteen thousand dollars (\$ 1,019,000) in augmentation of Item 4440-001-001 to provide for departmental support for additional administrative costs associated with the augmentation contained in subparagraph (B).

"(B) Eighteen million eight hundred four thousand dollars (\$ 18,804,000) in augmentation of Item 4440-101-001 to provide for the second year expansion of the system of care services during the three-year statewide phasein.

"(4) In order to provide for the third year of the statewide phasein of services under this part, the sum of twenty-six million ninety-one thousand dollars (\$ 26,091,000) is hereby appropriated from the General Fund to the department in augmentation of the Budget Act of 1998, in accordance with the following schedule:

"(A) One million nineteen thousand dollars (\$ 1,019,000) in augmentation of Item 4440-001-001 to provide for departmental support for additional administrative costs associated with the augmentation contained in subparagraph (B).

"(B) Twenty-five million seventy-two thousand dollars (\$ 25,072,000) in augmentation of Item 4440-101-001 to provide for the additional system of care services for the third year of the statewide phasein of services under this part."; (2) added subd (b); (3) redesignated former subd (b) to be subd (c); and (4) added the second, third, and fourth sentences of subd (c).

**NOTE-**

Stats 2000 ch 520 provides:

SEC. 15. This act shall be known, and may be cited, as the Cathie Wright Children's Mental Health Services Act.

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**ARTICLE 5. County Proposal Components**

**§ 5861. Proposals as joint, independent or service to subset**

Proposals for a system of care may be submitted for a region by several smaller counties acting jointly, as independent countywide proposals, or proposals to serve a discrete subset of the targeted population in a larger county, such as court dependents, court wards, or special education pupils.

**HISTORY:** Added Stats 1992 ch 1229 § 2 (AB 3015).

**NOTES:**

**FORMER SECTIONS:**

Former § 5861, relating to program proposal of coordinated system of services, was added Stats 1991 ch 89 § 197, effective June 30, 1991, and repealed Stats 1992 ch 1229 § 1.

**§ 5862. Three-year program proposal**

(a) Each county wishing to participate under this part shall develop a three-year program proposal for phasing in the children's comprehensive mental health services system.

(b) The three-year program proposal shall include all of the following:

(1) The components of the system the county proposes to implement in the first year, which shall include a case management component.

(2) The components of the system the county intends to implement in the second year.

(3) The remaining components of the system the county intends to implement in the third year. All components shall be in place by the end of the third year.

(c) Approval for participation shall be made by the department at the end of the three-year period.

**HISTORY:** Added Stats 1992 ch 1229 § 2 (AB 3015).

**NOTES:**

**FORMER SECTIONS:**

Former § 5862, similar to present W & I C § 5864, was added Stats 1991 ch 89 § 197, effective June 30, 1991, and repealed Stats 1992 ch 1229 § 1.

**§ 5863. Additional requirements**

In addition to the requirements of Section 5862, each county program proposal shall contain all of the following:

(a) Methods and protocols for the county mental health department to identify and screen the eligible target population children. These protocols shall be developed with collaborative partners and shall ensure that eligible children can be referred from all collaborating agencies.

(b) Measurable system performance goals for client outcome and cost avoidance. Outcomes shall be made available to collaborating partners and used for program improvement.

(c) Methods to achieve interagency collaboration by all publicly funded agencies serving children experiencing emotional disturbances.

(d) Appropriate written interagency protocols and agreements with all other programs in the county that serve similar populations of children. Agreements shall exist with wrap-around programs (Chapter 4 (commencing with Section 18250) of Part 6 of Division 9), Family Preservation programs (Part 4.4 (commencing with Section 16600) of Division 9), Juvenile Crime Enforcement and Accountability Challenge Grant programs (Article 18.7 (commencing with Section 749.2) of Chapter 2 of Part 1 of Division 1), programs serving children with a dual diagnosis including substance abuse or whose emotional disturbance is related to family substance abuse, and programs serving families enrolled in CalWORKs (Chapter 2 (commencing with Section 11200.5) of Part 3 of Division 9).

(e) A description of case management services for the target population. Each county program proposal shall include protocols developed in the county for case management designed to provide assessment, linkage, case planning, monitoring, and client advocacy to facilitate the provision of appropriate services for the child and family in the least restrictive environment as close to home as possible.

(f) Mental health services that enable a child to remain in his or her usual family setting and that offer an appropriate alternative to out-of-home placement.

(g) Methods to conduct joint interagency placement screening of target population children prior to out-of-home placement.

(h) Identification of the number and level of county evaluation staff and the resources necessary to meet requirements established by the State Department of Mental Health to measure client and cost outcome and other system performance measures.

(i) A budget specifying all new and currently funded mental health expenditures provided as part of the proposed system of care. The department shall establish reporting requirements for direct and indirect administrative overhead, to be included in the request for proposals. Weight shall be given to counties with lower administrative overhead costs. In no case shall administrative costs exceed those of existing county mental health programs and services. Expenditures for evaluation staff and resources shall not be considered administrative costs for this purpose.

(j) Any requirements for interagency collaboration, agreements, or protocols contained in this section shall not diminish requirements for the confidentiality of medical information or information maintained by a county agency or department.

**HISTORY:** Added Stats 1992 ch 1229 § 2 (AB 3015). Amended Stats 2000 ch 520 § 8 (SB 1452).

**NOTES:**

**FORMER SECTIONS:**

Former § 5863, similar to present W & I C § 5867, was added Stats 1991 ch 89 § 197, effective June 30, 1991, and repealed Stats 1992 ch 1229 § 1.

**AMENDMENTS:**

2000 Amendment:

(1) Added the second sentence of subd (a); (2) added the second sentence of subd (b); (3) amended subd (d) by adding (a) "with all other programs in the county that serve similar populations of children" in the first sentence; and (b) the second sentence; and (4) added subd (j).

**NOTE-**

Stats 2000 ch 520 provides:

SEC. 15. This act shall be known, and may be cited, as the Cathie Wright Children's Mental Health Services Act.

**§ 5864. Development of baseline data on children served**

Participating counties shall, prior to the submission of their program proposals, develop baseline data on children served by the county in the mental health services system, social services system, the juvenile justice system, and the special education system. Data shall include, but not be limited to, the numbers of children and current expenditures for group homes, nonpublic school placements, and state hospital placements. This baseline data shall be submitted to the department as part of the program proposal.

**HISTORY:** Added Stats 1992 ch 1229 § 2 (AB 3015).

**NOTES:**

**FORMER SECTIONS:**

Former § 5864, relating to interagency children's policy council and case management council, was added Stats 1991 ch 89 § 197, effective June 30, 1991, and repealed Stats 1992 ch 1229 § 1.

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**ARTICLE 6. County System of Care Requirements**

**§ 5865. Requirements for counties within specified period following funding**

Each county shall have in place, with qualified mental health personnel, all of the following within three years of funding by the state:

(a) A comprehensive, interagency system of care that serves the target population as defined in Section 5856.

(b) A method to screen and identify children in the target population. County mental health staff shall consult with the representatives from special education, social services, and juvenile justice agencies, the mental health advisory board, family advocacy groups, and others as necessary to help identify all of the persons in the target populations, including persons from ethnic minority cultures which may require outreach for identification.

(c) A defined mental health case management system designed to facilitate the outcome goals for children in the target population.

(d) A defined range of mental health services and program standards that involve interagency collaboration and ensure appropriate service delivery in the least restrictive environment with community-based alternatives to out-of-home placement.

(e) A defined mechanism to ensure that services are culturally competent.

(f) A defined mechanism to ensure that services are child-centered and family-focused, with parent participation in planning and delivery of services.

(g) A method to show measurable improvement in individual and family functional status for children enrolled in the system of care.

(h) A method to measure and report cost avoidance and client outcomes for the target population which includes, but is not limited to, state hospital utilization, group home utilization, nonpublic school residential placement, school attendance and performance, and recidivism in the juvenile justice system.

(i) A plan to ensure that system of care services are planned to complement and coordinate with services provided under the federal Early and Periodic Screening, Diagnosis and Treatment services (Section 1396d(a)(4)(B) of Title 42 of the United States Code), including foster children served under Section 5867.5, where those services are medically necessary but children do not meet the requirements of Section 5600.3.

(j) A plan to ensure that system of care services are planned to complement and coordinate with services provided to CalWORKs (Chapter 2 (commencing with Section 11200.5) of Part 3 of Division 9) recipients whose families receive mental health treatment services.

(k) A defined partnership between the children's system of care program and family members of children who have been or are currently being served in the county mental health system. This partnership shall include family member involvement in ongoing discussions and decisions regarding policy development, program administration, service development, and service delivery.

**HISTORY:** Added Stats 1992 ch 1229 § 2 (AB 3015). Amended Stats 2000 ch 520 § 9 (SB 1452).

**NOTES:**

**FORMER SECTIONS:**

Former § 5865, relating to availability of data on services provided, was added Stats 1991 ch 89 § 197, effective June 30, 1991, and repealed Stats 1992 ch 1229 § 1.

**AMENDMENTS:**

2000 Amendment:

Added (1) "family advocacy groups," after "advisory board," in the second sentence of subd (b); and (2) added subds (i)-(k).

**NOTE-**

Stats 2000 ch 520 provides:

SEC. 15. This act shall be known, and may be cited, as the Cathie Wright Children's Mental Health Services Act.

**§ 5865.1. Structures and services for ages 15 to 21**

When a county system of care serves children 15 to 21 years of age, the following structures and services shall, to the extent possible, be available, and if not available, the county plan shall identify a timeline for the development of these services:

(a) Collaborative agreements with schools, community colleges, independent living programs, child welfare services, job training agencies, CalWORKs providers, regional center services, and transportation and recreation services as needed.

(b) Collaborative teams involving the youth and two or more agencies to develop a transition plan that identifies needs and resources required to successfully transition to independent living as an adult.

(c) Service plans that identify the needs of the youth in the areas of employment, job training, health care, education, counseling, socialization, housing, and independent living skills, to be provided by any of the collaborative agencies and access points for the youth identified.

(d) Assistance with identifying the means for health insurance and educational linkages when the young person is more than 18 years of age.

(e) Specific plans for the young adult to identify individuals and community services that can provide support during the transition to 21 years of age.

(f) Assurances that goals for young adults are individual, identified by the youth, and developmentally appropriate.

(g) Any requirements for interagency collaboration, agreements, or protocols contained in this section shall not diminish requirements for the confidentiality of medical information or information maintained by a county agency or department.

**HISTORY:** Added Stats 2000 ch 520 § 10 (SB 1452).

**NOTES:****NOTE-**

Stats 2000 ch 520 provides:

SEC. 15. This act shall be known, and may be cited, as the Cathie Wright Children's Mental Health Services Act.

**§ 5865.3. Structures and services for ages zero to five**

When a county system of care services children, zero to five years of age, the following structures and services shall be available, and when not available, the county plan shall identify a timeline for the development of these services:

(a) Collaborative agreements with public health systems, regional center services, child care programs, CalWORKs providers, drug and alcohol treatment programs, child welfare services, and other agencies that may identify children and families at risk of mental health problems that affect young children.

(b) Outreach protocols that can assist parents to identify child behaviors that may be addressed early to prevent mental or emotional disorders and assure normal child development.

(c) Identification of trained specialists that can assist the parents of very young children at risk for emotional, social, or developmental problems with treatment.

(d) Performance measures that ensure that services to families of very young children are individual, identified by the family, and developmentally appropriate.

**HISTORY:** Added Stats 2000 ch 520 § 11 (SB 1452).

**NOTES:**

NOTE-

Stats 2000 ch 520 provides:

SEC. 15. This act shall be known, and may be cited, as the Cathie Wright Children's Mental Health Services Act.

**§ 5866. Interagency collaboration; Interagency policy and planning committee; Countywide interagency case management council; Interagency agreements**

(a) Counties shall develop a method to encourage interagency collaboration with shared responsibility for services and the client and cost outcome goals.

(b) The local mental health director shall form or facilitate the formation of a county interagency policy and planning committee. The members of the council shall include, but not be limited to, family members of children who have been or are currently being served in the county mental health system and the leaders of participating local government agencies, to include a member of the board of supervisors, a juvenile court judge, the district attorney, the public defender, the county counsel, the superintendent of county schools, the public social services director, the chief probation officer, and the mental health director.

(c) The duties of the committee shall include, but not be limited to, all of the following:

(1) Identifying those agencies that have a significant joint responsibility for the target population and ensuring collaboration on countywide planning and policy.

(2) Identifying gaps in services to members of the target population, developing policies to ensure service effectiveness and continuity, and setting priorities for interagency services.

(3) Implementing public and private collaborative programs whenever possible to better serve the target population.

(d) The local mental health director shall form or facilitate the formation of a countywide interagency case management council whose function shall be to coordinate resources to specific target population children who are using the services of more than one agency concurrently. The members of this council shall include, but not be limited to, representatives from the local special education, juvenile probation, children's social services, and mental health services agencies, with necessary authority to commit resources from their agency to an interagency service plan for a child and family. The roles, responsibilities, and operation of these councils shall be specified in written interagency agreements or memoranda of understanding, or both.

(e) The local mental health director shall develop written interagency agreements or memoranda of understanding with the agencies listed in this subdivision, as necessary. Written interagency agreements or memoranda shall specify jointly provided or integrated services, staff tasks and responsibilities, facility and supply commitments, budget considerations, and linkage and referral services. The agreements shall be reviewed and updated annually.

(f) The agreements required by subdivision (e) may be established with any of the following:

(1) Special education local planning area consortiums.

(2) The court juvenile probation department.

(3) The county child protective services agency.



- (4) The county public health department.
- (5) The county department of drug and alcohol services.
- (6) Other local public or private agencies serving children.

**HISTORY:** Added Stats 1992 ch 1229 § 2 (AB 3015). Amended Stats 2000 ch 520 § 12 (SB 1452).

**NOTES:**

**AMENDMENTS:**

2000 Amendment:

Substituted "family members of children who have been or are currently being served in the county mental health system and" for "the" in the second sentence of subd (b).

**NOTE-**

Stats 2000 ch 520 provides:

SEC. 15. This act shall be known, and may be cited, as the Cathie Wright Children's Mental Health Services Act.

**§ 5867. Demonstration of maintenance of effort**

Counties shall demonstrate a maintenance of effort in children's mental health services. Any reduction of existing Bronzan-McCorquodale children's services provided under Part 2 (commencing with Section 5600) shall be identified and justified in the program proposal developed under this chapter.

**HISTORY:** Added Stats 1992 ch 1229 § 2 (AB 3015).

**§ 5867.5. Provision of mental health screening, assessment, and treatment services for certain children in out of home group care; Estimate of resources; Review of treatment plans**

(a) Beginning in the 1998-99 fiscal year, county mental health departments that receive full system of care funding, as determined by the State Department of Mental Health in consultation with counties, shall provide to children served by county social services and probation departments mental health screening, assessment, participation in multidisciplinary placement teams and specialty mental health treatment services for children placed out of home in group care, for those children who meet the definition of medical necessity, to the extent resources are available. These counties shall give first priority to children currently receiving psychoactive medication.

(b) The State Department of Mental Health shall develop, by June 1, 1999, an estimate of the extent to which mental health assessment and treatment resources are available to meet all of the following needs:

- (1) Children placed in group care by county departments of social services and probation.
- (2) Children placed in out-of-home care by county departments of social services.
- (3) Children at risk of placement out of home who are receiving services from county departments of social services or probation.
- (c) The estimate required by subdivision (b) shall include identification of specific resource gaps, including human resource gaps, in the delivery of specialty mental health services to children identified by county social services and probation.

(d) The State Department of Mental Health shall develop, with the assistance of the State Department of Social Services and the Judicial Council, with participation by county mental health departments, county health departments, and county social services departments, and in consultation with group home providers and representatives of current or former foster youth and representatives of pediatricians and child and adolescent psychiatrists, by July 1, 1999, a procedure for review of treatment plans for children receiving prescribed psychoactive medication and who are placed in out-of-home care.

**HISTORY:** Added Stats 1998 ch 311 § 56 (SB 933), effective August 19, 1998.

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**ARTICLE 7. County Service Standards**

**§ 5868. Establishment; Requirements**

(a) The department shall establish service standards that ensure that children in the target population are identified and receive needed and appropriate services from qualified staff in the least restrictive environment.

(b) The standards shall include, but not be limited to:

(1) Providing a comprehensive assessment and treatment plan for each target population client to be served, and developing programs and services that will meet their needs and facilitate client outcome goals.

(2) Providing for full participation of the family in all aspects of assessment, case planning, and treatment.

(3) Providing methods of assessment and services to meet the cultural, linguistic, and special needs of minorities in the target population.

(4) Providing for staff with the cultural background and linguistic skills necessary to remove barriers to mental health services resulting from a limited ability to speak English or from cultural differences.

(5) Providing mental health case management for all target population clients in, or being considered for, out-of-home placement.

(6) Providing mental health services in the natural environment of the child to the extent feasible and appropriate.

(c) The responsibility of the case managers shall be to ensure that each child receives the following services:

(1) A comprehensive mental health assessment.

(2) Case planning with all appropriate interagency participation.

(3) Linkage with all appropriate mental health services.

(4) Service plan monitoring.

(5) Client advocacy to ensure the provision of needed services.

**HISTORY:** Added Stats 1992 ch 1229 § 2 (AB 3015).

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**ARTICLE 8. State Department of Mental Health Requirements**

**§ 5869. What department must provide participating counties**

The department shall provide participating counties with all of the following:

(a) Applications for funding guidelines and format, and coordination and oversight of the selection process as described in Article 4 (commencing with Section 5857).

(b) Contracts with each state funded county specifying the approved budget, performance outcomes, and a scope of work plan for each year of participation in the children's system of care program.

(c) Technical assistance related to system evaluation.

**HISTORY:** Added Stats 1992 ch 1229 § 2 (AB 3015). Amended Stats 1996 ch 1167 § 4 (SB 1667), effective September 30, 1996; Stats 2000 ch 520 § 13 (SB 1452).

Amended Stats 2002 ch 1161 § 37 (AB 442), effective September 30, 2002.

**NOTES:**

**AMENDMENTS:**

1996 Amendment:

Added ", either directly or through contract" in subd (d).

2000 Amendment:

(1) Substituted "Applications for funding" for "Request for proposal" in subd (a); (2) amended subd (b) by substituting (a) "specifying" for "stipulating" after "funded county"; and (b) "a scope of work plan for each year of participation in the children's system of care program" for "scope of work"; and (3) added "and participants" in subd (d).

2002 Amendment:

(1) Substituted subd (c) for former subd (c) which read: "(c) A contract with an independent evaluator for the purpose of measuring performance outcomes and providing technical assistance to the state and counties related to system evaluation."; and (2) deleted former subd (d) which read: "(d) Training, consultation, and technical assistance for county applicants and participants, either directly or through contract."

**NOTE-**

Stats 2000 ch 520 provides:

SEC. 15. This act shall be known, and may be cited, as the Cathie Wright Children's Mental Health Services Act.

**§ 5870. Advisory group**

The State Department of Mental Health shall establish an advisory group comprised of, but not limited to, representatives from the State Department of Education, the State Department of Social Services, the State Department of Mental Health, the Secretary of Child Development and Education, the County Mental Health Directors Association, the County Welfare Directors Association, the Chief Probation Officers Association, the Special Education Local Planning Areas Directors Association, and service providers from the private sector. The function of the advisory group shall be to advise and assist the state and counties in the development of a coordinated, comprehensive children's services system under this part and other duties as defined by the Director of Mental Health.

**HISTORY:** Added Stats 1992 ch 1229 § 2 (AB 3015). Amended Stats 1996 ch 1167 § 5 (SB 1667), effective September 30, 1996.

**NOTES:****AMENDMENTS:**

1996 Amendment:

(1) Substituted "County Mental Health Directors Association" for "Conference of Local Mental Health Directors"; and (2) deleted the former last sentence which read: "The advisory group shall submit recommendations to the Director of Mental Health regarding the selection of participating counties."

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**ARTICLE 9. Requirement to Collect Reimbursements**

**§ 5872. Collection of reimbursement by participating counties**

In order to offset the cost of services, participating counties shall collect reimbursement for services from the following sources:

- (a) Fees paid by families, which shall be the same as patient fees established pursuant to Section 5718.
- (b) Fees paid by private or public third-party payers.
- (c) Categorical funds from sources established in state or federal law, for which persons with mental disorders are eligible.

**HISTORY:** Added Stats 1992 ch 1229 § 2 (AB 3015).

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**ARTICLE 10. Application for State Regulation Waivers**

**§ 5875. Administrative waiver process**

The Secretary of Health and Welfare shall require the State Department of Mental Health to develop an administrative waiver process for counties that either propose to be, or are considered, system of care counties by the department.

**HISTORY:** Added Stats 1992 ch 1229 § 2 (AB 3015).

**§ 5877. Requests for waivers**

(a) For system of care counties, or as part of the county program proposal to apply for status as a system of care county, requests may be made for waivers from those state regulations that appear to prevent interagency coordination or collaboration in interagency case management and other service delivery capabilities.

(b) The state regulation or regulations shall be specifically identified in the waiver request, with a statement of the reason why the identified regulation or regulations should be waived and, where applicable, the following:

(1) An assurance as to how planned interagency collaborative activities can meet the program intent of the regulation or regulations.

(2) An explanation as to why the identified regulation or regulations would create duplication of effort with an interagency collaborative approach.

(3) An explanation as to how a waiver of the regulation or regulations would not hinder the ability of the involved state agency's fiscal accountability or responsibility for federal moneys, and how granting of the waiver would support achievement of estimated cost avoidance, and result in decreased use of group homes, children and adolescent state hospital programs, nonpublic school residential placement, and juvenile justice reincarcerations, and in improved school attendance or performance.

**HISTORY:** Added Stats 1992 ch 1229 § 2 (AB 3015).

**§ 5878. Waiver of state regulatory obstacles; Federal waivers**

(a)(1) The Secretary of the Health and Welfare Agency, the Superintendent of Public Instruction, or the Secretary of the Youth and Corrections Agency may waive any state regulatory obstacles to the integration of public responsibilities and resources required for counties which have been approved as system of care counties.

(2) The waiver shall remain in effect as long as the local program continues to meet standards as specified in the scope of work plan approved by the State Department of Mental Health.

(b) The Secretary of Health and Welfare, the Superintendent of Public Instruction, and the Secretary of the Youth and Corrections Agency, and those departments designated as single state agencies administering federal programs, shall make every effort to secure federal waivers and any other changes in federal policy or law necessary to support interagency collaboration and coordination in a system of care service delivery system.

**HISTORY:** Added Stats 1992 ch 1229 § 2 (AB 3015).